

Securing Food, Securing Our Health: The Impact of Food Insecurity on Latinx Children & Families

Latino Coalition for a Healthy California in partnership
with Nourish California and The Children's Partnership





EXECUTIVE SUMMARY

California helps feed the nation and the world, producing more agriculture than any other state in the US.¹ The vast majority – approximately 83% – of the essential agricultural workers who pick and produce the nation’s food are Latinx.² Yet, Latinx children, families, and communities struggle to access the food they need to be healthy and thrive.

Latinx Californians make up a plurality of the state’s residents comprising 39% of the population,³ over half of the state’s children,^{3,1} and at least half of the state’s more than two million undocumented immigrants.⁴ In 2020, more than one in three Latinx adults across California lived in food-insecure households.^{4,1} Nearly 950,000 of those adults lived in food-insecure households that included children.⁵ Throughout California 1.4 million Latinx children live in families whose incomes fall below the federal poverty level.⁶

These stark outcomes among Latinxs are rooted in structural barriers fueled by systemic racism that perpetuates poverty, anti-immigrant policies, and hostile political climates that persistently prevent or restrict Latinx households from accessing the critical resources, programs, and services that can help them lead healthy and active lives.⁷

The brief recommends the following policy solutions to address these structural barriers to food access for Latinx Californians, including Latinx children:

POLICY RECOMMENDATIONS:

Food4All: Fully implement Food4All by expanding the California Food Assistance Program (CFAP) nutrition benefits to California immigrants of all ages, regardless of immigration status. No Exceptions. No Exclusions.

Agency Coordination of Benefits and Simplification of Enrollment: Engage in effective inter-agency coordination that both ensures successful implementation of safety net programs and addresses public charge fears that keep families from accessing food assistance.

Utilization of Community-based Models for Outreach and Enrollment: Utilization of culturally and linguistically competent workforce models like Community Health Workers and Promotoras can increase enrollment into safety net programs as well as increase trust in government agencies by impacted communities.

Support Meal Programs that Reach Children: Provide free daily meals to children in childcare, schools, and other access points like community-based organizations for children.

Make State and Federal Pandemic-Era Nutrition and Economic Relief Programs Permanent: Continue current and expand Summer EBT Demonstration Projects and permanently establish the expanded federally administered Child Tax Credit (CTC).



OVERVIEW

California helps feed the nation and the world, producing more agriculture than any other state in the US.⁸ The vast majority – approximately 83% – of the essential agricultural workers who pick and produce the nation's food are Latinx.⁹ Yet, in 2020, more than one in three Latinx adults across California lived in food-insecure households.^{9,1} Nearly 950,000 of those adults lived in food-insecure households that included children.¹⁰ These striking gaps in food access are rooted in structural barriers fueled by systemic racism that perpetuates poverty, anti-immigrant policies, and hostile political climates that persistently prevent or restrict Latinx households from accessing the nutrition assistance programs they need to lead healthy and active lives.¹¹

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Latinx children and families are a diverse community who face complex, multifaceted issues like food insecurity. Latinx Californians make up a plurality of the state's residents—comprising 39% of the population and over half of the state's 9 million children.¹²

At least half of the two million undocumented immigrants in our state are Latinx.¹³ Over half of California's Latinx children (56%) have at least one parent who was born outside of the US.^{13,1} One in five (20%) or 1.4 million Latinx children live in families whose income falls below the federal poverty level. fifty two percent of households with Latinx children are burdened by high housing and utility costs.¹⁴

This brief provides an overview of food insecurity impacting Latinx children and families as well as policy recommendations to support equitable food access, good health, and overall wellbeing.



PREVALENCE OF FOOD INSECURITY AMONG LATINX HOUSEHOLDS

Food insecurity disproportionately – and persistently – affects Latinx households. Across the US, more than one in six Latinx households are food insecure.^{14,1}

Nationwide, households with children are more likely to experience food insecurity than households without children.¹⁵ Latinx households with children experience food insecurity at more than twice the rate than both white households with children and all households with children. ¹⁶

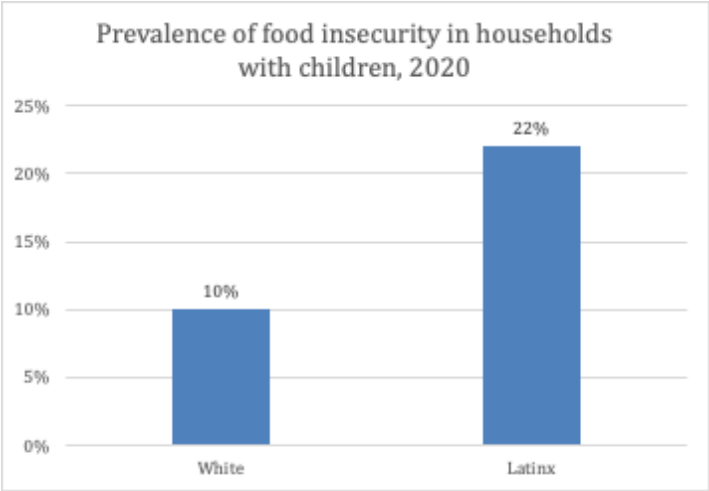


Figure 1. Prevalence food insecurity in White and Latinx households with children, 2020, USDA, Economic Research Service

ACROSS CALIFORNIA:

- For the past decade, rates of food insecurity have persisted, consistently affecting more than **one in three Latinx adults** - with rates at nearly 50% in some years.¹⁷
- Household food insecurity affects nearly **950,000 Latinx adults** in families with children.¹⁸
- **42% of Latinx parents** with young children 0-5, say they are unsure or will not be able to afford **basic expenses** like food and housing.¹⁹
- Over **a third of Latinx parents** of young children say they have skipped or reduced the size of their own or their child's meals **as a result of COVID-19**.²⁰

FOOD INSECURITY, HEALTH, AND WELLBEING



IN LATINX ADULTS

Studies have shown that adults experiencing food insecurity are prone to a number of short- and long-term health and behavioral impacts, many of which may continue even after a period of food insecurity has passed.²¹ This includes vulnerability to an onslaught of chronic diseases such as diabetes, hypertension, and heart disease to name a few.²²

One such chronic disease in which Latinx are overrepresented and that is associated with food insecurity is type 2 diabetes. Type 2 diabetes occurs when the body resists or is not able to take in insulin. A lack of available food can lead to the development of type 2 diabetes. A study by the University of Connecticut found that food insecure Latinos had higher insulin resistance than those who were food secure. A pervasive lack of food can then lead to the development of type 2 diabetes – an experience that many Latinos face.²³ In fact, Latinxs are almost twice as likely to have type 2 diabetes than non-Hispanic whites.

Food insecurity and associated coping strategies increase physician encounters and office visits, emergency room visits, hospitalizations, and expenditures for prescription medications, costing individuals facing food insecurity an extra \$1,863 in health care costs annually, as compared to food-secure individuals.²⁵

IN LATINX CHILDREN

Consistent access to nutritious food is fundamental to health and wellbeing, particularly during critical periods of development. However, structural inequities such as poverty are a cause of food insecurity. It is no surprise many Latinx families experience food insecurity given that twenty percent of Latinx families with children in California live under the federal poverty level. Food insecurity is associated with a host of physical, behavioral, and academic outcomes for children.²⁶

- **According to the Food Research and Access Center (FRAC), “children living in food-insecure homes are more likely to be tardy or absent from school, and are also more likely to be apathetic, withdrawn, non-responsive, and have decreased motivation in the classroom.”²⁷**
- **The chronic, toxic stress caused by food insecurity can cause delays in brain development, produce anxiety, impair mood control, and create emotional behavioral disorders in children.²⁸**
- **Food insecurity severity increases the risk of developing of mood disorders, such as depression or bipolar disorder, in adolescents.²⁹**
- **Chronic health conditions are a consequence of food insecurity for children. Studies show that children in food-insecure households have higher rates of lifetime asthma diagnosis and depressive symptoms that are 19.1% and 27.9% higher, respectively. Additionally, these children are 26% more likely to use the emergency room and also have almost more than twice the rate of foregoing medical care completely.³⁰**

Further, a parent's health is one of the strongest predictors of a child's health.³¹ A parent or guardian's inability to access health and food benefits can thus have indirect consequences on a child's health. Children in households where parents lack access to critical benefits suffer the loss of income and other assistance that could support their healthy development. In contrast, when parents are able to access benefits, their children are also more likely to benefit as well.



Poverty, Unemployment & Food Insecurity

Poverty and a lack of sufficient resources are underlying drivers of structural inequities that cause food insecurity. Unemployment, under employment, insufficient benefits, and poor wages leave households without enough income to meet basic needs, particularly given California's relentlessly high cost of living. To afford basic necessities, such as food, childcare, health insurance, housing, and transportation, an average household of two working adults and two children would have to earn an estimated \$129,000 a year in California.³² Yet, more than 70% of Latinx Californian households make less than \$100,000 a year.³³

To be income-eligible for CalFresh, most households must have a gross income at or below 200% of the federal poverty guidelines (\$55,500 annually for a household of four) and a net income at or below 100% of the federal poverty guidelines (\$27,750 annually for a household of four).³⁴ This leaves an estimated 42% gap of Latinx households whose gross income is over the income limits to qualify for CalFresh benefits but who make less than a living wage to afford living expenses, including food, in California.^{35, 36} These kinds of systemic barriers to economic opportunity disproportionately affect Latinx Californians, driving inequitable outcomes, including inequitable rates of food insecurity.³⁷

- **1 in 5 (20%) or 1.4 million Latinx children live in families whose incomes fall below the federal poverty threshold.**³⁸
- **In a 2021 statewide survey, respondents cited high food prices and inconsistent or not enough income as the biggest barriers to getting enough food for themselves and their families.**³⁹
- **The CA Poverty Measure accounts for cost of living and multiple resources, including the receipt of public benefits. This measure shows that the poverty rate among Latinx Californians is higher than all other racial and ethnic groups.**⁴⁰ **While Latinx Californians make up 40% of the state's overall population, more than 50% of Californians affected by poverty are Latinx, reflecting a significant racial economic disparity.**⁴¹
- **As of March 2022, 6.9% of Latinx Californians are unemployed, while the statewide unemployment rate is 6.3%.**⁴²



Reach of CalFresh, Uptake, and Immigrant Inclusion

Federally funded CalFresh (known as federally as the Supplemental Nutrition Assistance Program, or SNAP) and the equivalent state-funded California Food Assistance Program or CFAP (serving “qualified” immigrants⁴³) provide nutrition benefits to help households afford enough food. Participation in CalFresh is tied to positive health, development, and food access outcomes.⁴⁴ Outcomes include improved current and long-term health, lower health costs and more food security.⁴⁵

The program is also shown to mitigate poverty. Latinx households comprise 40% of all household participating in CalFresh⁴⁶ and approximately 1 in 4 of Latinx children in California are receiving CalFresh.⁴⁷

However, in addition to overall policy and operational barriers, like complex, burdensome enrollment processes, that limit access to CalFresh, many households face specific barriers that keep Latinx Californians - especially Latinx immigrants - from participating in food assistance programs. The effects of anti-immigrant policies add an additional layer of barriers to accessing food assistance such as CalFresh. Trump-era policies exacerbated the chilling effect that deter Latinx and Latinx immigrants from seeking assistance to afford food.

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- **Statewide, CalFresh fails to reach 30% of eligible individuals. Our participation rate falls below the national average (82%) and ranks California among the bottom seven states in the country.**⁴⁹
- **For families already participating in CalFresh but had a newborn, 32% experienced a delay to increase household size, and therefore benefits, by the third month of their newborn child. These delays were more common for Latinx children relative to white children for CalFresh.**⁵⁰
- **From 2016 to 2019, there was a 34% decrease in mixed status families participating in California's CalFresh program--meaning 276,000 children in our state lost access to critical food benefits.**⁵¹
- **These were the same years the Trump administration's expanded public charge rule change was in effect. The decline in program participation during these years as reflected in the data affirms the chilling effect of anti-immigrant policies that worsened food security for immigrants.**⁵²
- **A recent statewide survey showed that nearly 1 in 3 respondents who have participated in CalFresh experienced discrimination or bias when applying for the program.**⁵³
- **Latinx respondents reported twice the rate of experiencing discrimination or bias compared to white respondents.**⁵⁴

Moreover, persistent access barriers, like language access, keep CalFresh enrollment rates from improving for Latinxs.

- **A recent statewide survey showed 1 in 5 respondents who have participated in CalFresh experienced a language barrier when applying for the program.**⁵⁵
- **Spanish speakers were twice as likely than English speakers to have this experience.**⁵⁶
- **An estimated 75% of individuals who experienced discrimination, bias, or language barriers reported that they would be less likely to apply for services in the future.**⁵⁷



The Role of State & Federal Food Assistance Programs in Increasing Food Access for Positive Latinx Health and Life Outcomes

Food insecurity in Latinx families has serious consequences for health, financial security, and children's long term educational success. Federal and state food assistance programs are critical to ensuring positive outcomes and creating a healthy, thriving state. Programs such as CalFresh, the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), the School Breakfast Program (SBP), the National School Lunch Program (NSLP) and the Child and Adult Care Food Program (CACFP) help mitigate hunger and poverty as they feed our youngest learners and help families put food on the table.

Since the onset of the pandemic, these programs have been lifelines for many who have struggled to access food before the pandemic and as a result of the pandemic. The impact of the pandemic was seen when CalFresh experienced a substantial increase in program enrollment, from 4.1 million enrolled in February 2020 to 4.8 million enrolled in June 2020.⁵⁸ However, despite the increased participation, in October 2020, 800,000 Californians reported food insufficiency and a lack of connection to nutrition assistance programs.⁵⁹ Although CalFresh assists families in times of hardship, programmatic barriers and exclusionary policies limit the potential reach and positive impact. Language access barriers, fear of the public charge rule, and immigration restrictions when accessing CalFresh create inequities that make Latinx communities disproportionately more impacted by food insecurity.



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Limitations of Food Assistance Programs & the Impact on Immigrant Latinx Families

*Denying food assistance due solely to a person's **immigration status** harms entire communities, especially in California where half of all children have **at least one immigrant parent**.*

California must address food insecurity within the undocumented community to effectively address state-level health disparities. CalFresh is a critical lifeline for millions of Californians, but many immigrants are unjustly and explicitly excluded from CalFresh and the state-funded California Food Assistance Program (CFAP) due to their immigration status. Denying food assistance due solely to a person's immigration status harms entire communities, especially in California where half of all children have at least one immigrant parent and over 3 million Californians with U.S. citizenship or legal permanent residency (LPR) live with undocumented family member(s).⁶¹ Furthermore, of the over two million undocumented immigrants in our state, at least half are Latinx.⁶²

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA) severely restricted immigrant access to public benefits, including SNAP/CalFresh.⁶³ California responded by establishing a state-funded nutrition program, the California Food Assistance Program (CFAP) for "qualified" immigrants who had lost eligibility. However, undocumented immigrants, Deferred Action for Childhood Arrivals (DACA) recipients, Temporary Protected Status (TPS) holders, and certain visa holders continue to be excluded from CalFresh due to outdated, xenophobic policies. Today, the CFAP serves about 35,000 "qualified" immigrants but the program has the potential to serve more immigrants.⁶⁴

Due to tremendous advocacy of anti-hunger, immigrant rights, and grassroots organizations and community members, state leaders are taking steps to remove immigrant exclusions from the state's food safety net programs. The Budget Act of 2021 included \$30 million in funding for planning and system automation required to expand the CFAP. In January 2022, Governor Newsom's budget proposal included \$35 million, increasing to \$113.4 million General Fund annually in 2025-26, to provide CFAP nutrition benefits to immigrants 55 and older who are excluded from CalFresh due to their immigration status. While these initial investments are important, a gap remains as California immigrants continue to face deep hardship and high levels of food insecurity across all ages.

Policy Recommendations

Bold, long-term, and equity-centered policy solutions must be implemented to address the systemic barriers that prevent Latinx children and families from accessing the food they need. The following are key policy recommendations that address food insecurity among Latinx communities.



Food4All:

SB 464 (Hurtado) and accompanied by a budget proposal (Santiago) would fully implement and fund Food4All by expanding CFAP nutrition benefits to California immigrants of all ages, regardless of immigration status. No Exceptions. No Exclusions. The Food4All coalition is working to address the long-standing discrimination in CalFresh by removing policies that exclude many California immigrants because of their immigration status. California has the ability to make Food4All a reality and set forth a different vision where all Californians – regardless of immigration status – can have access to the food they need.



Agency Coordination of Benefits and Simplification of Enrollment:

Engage in effective inter-agency coordination that both ensures successful implementation of safety net programs and addresses public charge fears that keep families from accessing food assistance. The state has made investments that would provide full scope Medi-Cal to undocumented immigrants. The Medi-Cal expansion, which began with undocumented children in 2016, will continue with older adult immigrants having access to Medi-Cal starting May 2022. State agencies will need to coordinate closely as these expansions take place to ensure immigrant families access all safety net programs for which they are eligible for. In addition, state agencies should deliver clear and consistent messaging on public charge to 'thaw' the chilling effect of this punitive policy. The California Health and Human Services is working with advocates to provide messaging that is effective and culturally relevant so that immigrant concerns are addressed across all state agencies. Additionally, the CalHHS should take steps to use data and eligibility findings from public benefits programs, such as Medi-Cal, to determine if children are also eligible for nutrition programs such as the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) and CalFresh, in order to facilitate enrollment and access to life-saving services. Minimizing barriers to access through streamlined enrollment is a strategy to best mitigate disenrollment from important public programs by immigrant families with children.⁶⁵



Utilization of Community-based Models for Outreach and Enrollment:

Utilizing community-based models such as Community Health Workers/Promotores and Health Navigators can rigorously improve the ability of government agencies to do culturally appropriate and competent outreach and enrollment work - increasing the enrollment of Latinx and other diverse communities into benefits programs. These models increase enrollment by building trusting relationships with impacted communities in addition to assisting families to enroll in assistance programs.



Make State and Federal Pandemic Era Nutrition and Economic Relief Programs Permanent:

Make Summer EBT Demonstration Projects available to many other states that are not able to participate, including California, to ensure that children have access to food during the summer, building on the tremendous success of the Demonstration Projects and Pandemic EBT (P-EBT). P-EBT provides food benefits to children who are eligible for free or reduced-price school meals and who have been affected by school closures due to the pandemic. P-EBT has been beneficial to low-income families, many who have lost their jobs and income during this pandemic. Summer EBT is a federal program that provides a monthly benefit to school-aged children on an EBT card that can be used throughout the summer to purchase food at grocery stores. Summer EBT would also provide children in immigrant families, many who participate in free or reduced-price school meals an opportunity to have year-around access to meals.



Support Nutrition Benefits Serving Children:

SB1481(Becker) would help ensure that all young children in our state are offered free and nutritious meals by enabling all childcare providers to qualify for the highest level of reimbursements for the meals they serve. Households with young children under age 6 are disproportionately affected by food insecurity.⁶⁶ California's youngest children cannot be left out of our state's effort to tackle food insecurity among young learners.

CONCLUSION:

Consistent access to nutritious food is fundamental to health and wellbeing. The "Securing Food, Securing Our Future" policy brief shows how the largest ethnic population in California is impacted by food insecurity. Latinx will continue to contribute to our state's future and California has the ability and resources to afford all Latinx families and children the sufficient nourishment they need to lead healthy and thriving lives.

**BOLD, LONG-TERM, AND EQUITY-CENTERED
POLICY SOLUTIONS MUST BE IMPLEMENTED TO
ADDRESS THE SYSTEMIC BARRIERS THAT PREVENT
LATINX CHILDREN AND FAMILIES FROM
ACCESSING THE FOOD THEY NEED.**



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- [53] <https://nourishca.org/wp-content/uploads/2021/08/Nourish-California-Comments-to-USDA-on-Advancing-Racial-Justice-and-Equity.pdf>
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- [55] <https://nourishca.org/wp-content/uploads/2021/08/Nourish-California-Comments-to-USDA-on-Advancing-Racial-Justice-and-Equity.pdf>
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- [57] <https://nourishca.org/wp-content/uploads/2021/08/Nourish-California-Comments-to-USDA-on-Advancing-Racial-Justice-and-Equity.pdf>
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Technical Notes

The California Health Interview Survey (CHIS), is a statewide representative survey conducted by the UCLA Center for Health Policy Research. CHIS assesses food insecurity among respondent households with incomes below 200% of the official federal poverty threshold. As a result, the CHIS food insecurity findings may not fully capture the prevalence of food insecurity among all populations

This brief used the ethnic and population terms Latino, Hispanic, and Latinx to collect data from the cited sources and databases. The brief uses the term Latinx to collectively refer to the multiple terms to identify people of Latin American origin living in the United States.



ABOUT LCHC:

Founded in 1992, the Latino Coalition for a Healthy California (LCHC) is the only Latinx-led statewide policy and advocacy organization protecting and advancing Latinx health equity. LCHC is fiscally sponsored by Tides Center, a 501(c)(3) non-profit organization.



ABOUT NOURISH CALIFORNIA:

Founded in 1992 and operating for over a quarter century as California Food Policy Advocates, Nourish California is a nonpartisan, statewide 501(c)3 nonprofit organization. We engage in policy advocacy and research at the local, regional, and state levels in California and at the federal level. When our small team isn't out meeting with communities, partners and policymakers, we can be found in our offices in Oakland, Los Angeles and San Diego.



ABOUT THE CHILDREN'S PARTNERSHIP:

TCP envisions a California where all children—regardless of their race, ethnicity or place of birth—have the resources and opportunities they need to grow up healthy and thrive, and its mission is to advance this vision of child health equity through research, policy and community engagement. Learn more at www.childrenspartnership.org.



